

**Application Data Sheet****Application Information**

|                                  |   |
|----------------------------------|---|
| Application number::             | Unassigned  |
| Filing Date::                    | March 25, 2005  |
| Application Type::               | Regular   |
| Subject Matter::                 | Utility   |
| Suggested classification::       |   |
| Suggested Group Art Unit::       |   |
| CD-ROM or CD-R?::                |   |
| Number of CD disks::             |   |
| Number of copies of CDs::        |   |
| Sequence submission?::           | Yes   |
| Computer Readable Form (CRF)?::  | Yes   |
| Number of copies of CRF::        | 1   |
| Title::                          | HYPOALLERGENIC ALLERGY VACCINES<br>BASED ON THE TIMOTHY GRASS POLLEN<br>ALLERGEN PHL P7 |
| Attorney Docket Number::         | 24741-1539  |
| Request for Early Publication?:: | No  |
| Request for Non-Publication?::   | No  |
| Suggested Drawing Figure::       |   |
| Total Drawing Sheets::           | 10  |
| Small Entity?::                  | Yes   |
| Latin name::                     |   |
| Variety denomination name::      |   |
| Petition included?::             | No  |
| Petition Type::                  |   |
| Licensed US Govt. Agency::       |   |
| Contractor Grant Numbers::       |   |
| Secrecy Order in Parent Appl.?:: | No  |

## **Applicant Information**

|   |                       |
|---|-----------------------|
| Applicant Authority Type::              | Inventor              |
| Primary Citizenship Country::           | Austria               |
| Status::                                | Full Capacity         |
| Given Name::                            | Kerstin               |
| Middle Name::                           |                       |
| Family Name::                           | Westritschnig         |
| Name Suffix::                           |                       |
| City of Residence::                     | Vienna                |
| State or Province of Residence::        |                       |
| Country of Residence::                  | Austria               |
| Street of mailing address::             | Gentzgasse 92-94/2/20 |
| City of mailing address::               | Vienna                |
| State or Province of mailing address::  |                       |
| Country of mailing address::            | Austria               |
| Postal or Zip Code of mailing address:: | A-1180                |

## **Applicant Information**

|   |                  |
|---|------------------|
| Applicant Authority Type::              | Inventor         |
| Primary Citizenship Country::           | Austria          |
| Status::                                | Full Capacity    |
| Given Name::                            | Margarete        |
| Middle Name::                           |                  |
| Family Name::                           | Focke            |
| Name Suffix::                           |                  |
| City of Residence::                     | Vienna           |
| State or Province of Residence::        |                  |
| Country of Residence::                  | Austria          |
| Street of mailing address::             | Utendorfgasse 22 |
| City of mailing address::               | Austria          |
| State or Province of mailing address::  |                  |
| Country of mailing address::            | Austria          |
| Postal or Zip Code of mailing address:: | A-1140           |

## Applicant Information

|   |                 |
|---|-----------------|
| Applicant Authority Type::              | Inventor        |
| Primary Citizenship Country::           | Austria         |
| Status::                                | Full Capacity   |
| Given Name::                            | Anna            |
| Middle Name::                           |                 |
| Family Name::                           | Twardosz        |
| Name Suffix::                           |                 |
| City of Residence::                     | Baden           |
| State or Province of Residence::        |                 |
| Country of Residence::                  | Austria         |
| Street of mailing address::             | Trostgasse 11/2 |
| City of mailing address::               | Baden           |
| State or Province of mailing address::  |                 |
| Country of mailing address::            | Austria         |
| Postal or Zip Code of mailing address:: | A-2500          |

## Applicant Information

|   |                  |
|---|------------------|
| Applicant Authority Type::              | Inventor         |
| Primary Citizenship Country::           | Austria          |
| Status::                                | Full Capacity    |
| Given Name::                            | Peter            |
| Middle Name::                           |                  |
| Family Name::                           | Valent           |
| Name Suffix::                           |                  |
| City of Residence::                     | Vienna           |
| State or Province of Residence::        |                  |
| Country of Residence::                  | Austria          |
| Street of mailing address::             | Schulgasse 7/1/8 |
| City of mailing address::               | Vienna           |
| State or Province of mailing address::  |                  |
| Country of mailing address::            | Austria          |
| Postal or Zip Code of mailing address:: | A-1180           |

## **Applicant Information**

|   |                       |
|---|-----------------------|
| Applicant Authority Type::              | Inventor              |
| Primary Citizenship Country::           | Austria               |
| Status::                                | Full Capacity         |
| Given Name::                            | Petra                 |
| Middle Name::                           |                       |
| Family Name::                           | Verdino               |
| Name Suffix::                           |                       |
| City of Residence::                     | Graz                  |
| State or Province of Residence::        |                       |
| Country of Residence::                  | Austria               |
| Street of mailing address::             | Grillparzerstrasse 23 |
| City of mailing address::               | Graz                  |
| State or Province of mailing address::  |                       |
| Country of mailing address::            | Austria               |
| Postal or Zip Code of mailing address:: | A-8010                |

## **Applicant Information**

|   |                  |
|---|------------------|
| Applicant Authority Type::              | Inventor         |
| Primary Citizenship Country::           | Austria          |
| Status::                                | Full Capacity    |
| Given Name::                            | Walter           |
| Middle Name::                           |                  |
| Family Name::                           | Keller           |
| Name Suffix::                           |                  |
| City of Residence::                     | Judendorf        |
| State or Province of Residence::        |                  |
| Country of Residence::                  | Austria          |
| Street of mailing address::             | Roetzerstrasse 8 |
| City of mailing address::               | Judendorf        |
| State or Province of mailing address::  |                  |
| Country of mailing address::            | Austria          |
| Postal or Zip Code of mailing address:: | A-8111           |

## **Applicant Information**

|   |                 |
|---|-----------------|
| Applicant Authority Type::              | Inventor        |
| Primary Citizenship Country::           | Austria         |
| Status::                                | Full Capacity   |
| Given Name::                            | Dietrich        |
| Middle Name::                           |                 |
| Family Name::                           | Kraft           |
| Name Suffix::                           |                 |
| City of Residence::                     | Vienna          |
| State or Province of Residence::        |                 |
| Country of Residence::                  | Austria         |
| Street of mailing address::             | Rebenweg 1/18/1 |
| City of mailing address::               | Vienna          |
| State or Province of mailing address::  |                 |
| Country of mailing address::            | Austria         |
| Postal or Zip Code of mailing address:: | A-1170          |



## **Applicant Information**

|   |                     |
|---|---------------------|
| Applicant Authority Type::              | Inventor            |
| Primary Citizenship Country::           | Austria             |
| Status::                                | Full Capacity       |
| Given Name::                            | Rudolf              |
| Middle Name::                           |                     |
| Family Name::                           | Valenta             |
| Name Suffix::                           |                     |
| City of Residence::                     | Theresienfeld       |
| State or Province of Residence::        |                     |
| Country of Residence::                  | Austria             |
| Street of mailing address::             | Beethovenstrasse 18 |
| City of mailing address::               | Theresienfeld       |
| State or Province of mailing address::  |                     |
| Country of mailing address::            | Austria             |
| Postal or Zip Code of mailing address:: | A-2604              |

## Correspondence Information

Correspondence Customer Number:: 26633

Name:: Heller Ehrman White & McAuliffe LLP

Street of mailing address:: 1717 Rhode Island Avenue, N.W.

City of mailing address:: Washington

State or Province of mailing address:: D.C.

Country of mailing address:: United States

Postal or Zip Code of mailing address:: 20036

Phone number:: 202-912-2000

Fax Number: 202-912-2020

E-Mail address:: pgranados@hewm.com

**Representative Information**

|                                  |       |  |
|----------------------------------|-------|--|
| Representative Customer Number:: | 26633 |  |
|----------------------------------|-------|--|

- OR -

| Representative Designation:: | Registration Number:: | Representative Name:: |
|------------------------------|-----------------------|-----------------------|
|                              |                       |                       |
|                              |                       |                       |
|                              |                       |                       |
|                              |                       |                       |

## Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|---------------|-------------------|----------------------|----------------------|
|               |                   |                      |                      |
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|               |                   |                      |                      |

## Foreign Priority Information

| Country:: | Application number:: | Filing Date::      | Priority Claimed:: |
|-----------|----------------------|--------------------|--------------------|
| WIPO      | PCT/EP03/010701      | September 25, 2003 | Yes                |
| EP        | 02021837.6           | September 27, 2002 | Yes                |

## Assignee Information

|   |  |
|---|--|
| Assignee name::                         | BIOMAY PRODUKTIONS- UND HANDELS-<br>AKTIENGESELLSCHAFT |
| Street of mailing address::             | Lazarettgasse 19                                       |
| City of mailing address::               | Vienna   |
| State or Province of mailing address::  |  |
| Country of mailing address::            | Austria  |
| Postal or Zip Code of mailing address:: | A-1090   |